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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			rst Named Ir	VBA10F	ZHOU. Gu	oxiang	
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hereby claim foreign priority niverby claim foreign priority nivenbor's or plant breeder's floountry other than the United application for patent, inventor before that of the application or	benefits under ghts certificate(s States of Americ 's or plant breed	35 U.S.C. 119(a) i), or 365(a) of an ia, listed below an lea's fights certific s claimed.)-(d) or (f), ny PCT inte nd have also ate(s), or a	or 365(b) of mational applications of the mational applications of the mation of the m	below, by c mational ap	hecking the plication h	box, any foreig aving a filing dat
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DECLARATION — Utility or Design Patent Application Correspondence address below OR V Customer Number: Direct all correspondence to: Namo Mr. Michael Roman do Clark, Wilson Address Suite 800 - 885 West Georgia Street State V6C 3H1 ВĈ Vancouver Fax Telephone Country 604,687,6314 604.843.3132 Canada I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Family Name Given Name (first and middle (if any)) Gudwang or Sumame Inventor's Signature W XIOW Citizenship Country 5tale Residence: City Canada Canada BC Vancouver Mailing Address 404 - 7241 Cambie Street Country ZIP V6P 3H3 Canada Vancouver BCA petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Family Name Given Name or Sumame (first and middle [if any]) Date inventor's Signature Citizenship Country State Residence: City Mailing Address ZP State City suppliemental sheet(s) PTO/SB/02A or 02LR satisfact historic Additional inventors or a logal representative are being named on the

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Application Number POWER OF ATTORNEY First Named Inventor ZHOU, Guextang CRILLE & M & A FOR MANUFACTURING IT CORRESPONDENCE ADDRESS Art Unit INDICATION FORM Examiner Name 27371-1 Attorney Ducket Number I hereby appoint Practitioners associated with the Customer Number. Practitioner(s) named below: Registration Number 43431 Michael Roman as my/our atturney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Petert and Trademark Office connected transmith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mantioned Customer Number: The address associated with Customer Number. Firm or Michael Roman ofo Clark, Wilson Individual Name Suite 600 Address 885 West Georgia Street Address Zip V6C 3H1 State BC Varipouver City Country Carrada Fax 604.687.5314 604.643.3132 Telephone l am tha: 4 Applicant/inventor. Assignes of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enalosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Quoxiang Zhou X Signature XTOM n'c 31 NOTE; Signatures of all the inventors or assignates of record of the errors interest or their representative(s) are required. Sub-rit multiple forms if more than one signature is required, see below. This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or rotain a benefit by the public which is to tile (and by the USFTO to process) an application. Confroendistly is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 infinition to complete, USFTO to process) an application. Confroendistly is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 infinition to complete the USFTO. Then will vary deponding upon the individual case. Any comments including gathering, preparing, and extenditing the complete of the complete of the USFTO. Then will vary deponding upon the individual case. Any comments including gathering, preparing a complete this form and/or suggestions for rectaing this burdon, should be sent to this Chief intermedion Office, U.S. Palent in the emonant of time you require the complete this form and/or suggestions for rectaing this burdon, should be sent to this Chief intermedion Office, U.S. Palent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. forms are submitted.

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